

MINUTES

eHealth Care Quality and Patient Safety Board Information Exchange Workgroup June 15, 2006

Location: 1 W. Wilson Street, Room B372, Madison

Time: 11:00 a.m. - 12:00 p.m.

Attendees:

Members

- John Hartmann
- Debra Rislow
- Bob Schmitt
- Karl Stebbins
- Susan Turney
- Denise Webb
- Louis Wenzlow
- Hugh Zettel (Chair)

Resources

- Keith Haugrud
- Debbie Rickelman
- Vinny Taneja
- Herb Thompson
- Lorna Will

Staff

- Stacia Jankowski
- Audrey Nohel
- Judith Nugent

Introductions

Meeting began at approximately 11:10 a.m. There were some technical difficulties that resulted in a late start time.

Hugh Zettel welcomed the members and said that all meetings will be recorded for transparency and minutes will be drafted and distributed. He asked that members state their name prior to speaking.

Health information synergy

Denise Webb reported on the activities occurring within the Department relating to technology and data exchange, with a primary focus on work occurring within the Medicaid program. She reported the following:

- The Division of Health Care Financing (DHCF) had created a master person index (MPI, referred to as a master client index or MCI in this area) for use in their eligibility determination system. The MPI relies on a unique identifier for each applicant, as part of the eligibility determination system Client Assistance for Re-employment and Economic Support (CARES). The MPI functionality was pulled out of the CARES system and modified to operate as a Web service/utility so other programs could use/call this Web service.
- The DHCF is evaluating the matching algorithms used in the Wisconsin Immunization Registry system's MPI functionality because it is more a more sophisticated matching algorithm (developed by EDS) than the one used for the MPI developed by Deloitte.

- A Medicaid emergency room use Web application has been developed to provide emergency room usage by Medicaid recipients using Medicaid claims data. This is being deployed at 10 hospitals in Milwaukee initially.

Mr. Zettel asked if any consideration had been given to including state staff in the MPI that was developed. Ms. Webb said that this has not been discussed, but the discussion has instead been about using one MPI across all programs. Issues related to pulling state staff into the system would need to be addressed by the state's Chief Information Officer. Judith Nugent reported that she has been working on a Public Health Information Network (PHIN) workgroup that has also been discussing the concept of a master person index (MPI). In its discussions, the workgroup has been looking at the Wisconsin Immunization Registry (WIR), which has 65% or more of Wisconsin residents already in the system. In looking at this system, the workgroup was focused on finding a solution that would get people to buy-in, simply because it has the largest possible index of Wisconsin residents. This allows for a population-based system rather than one that has concerns about confidentiality in terms of why the person is in the system. Mr. Zettel said that the Markle Foundation has information on MPI that the workgroup may want to consider. Ms. Webb said that she thought that the workgroup could recommend some ideas to forward the concept of MPI for Wisconsin.

Ms. Webb offered to share some documentation on both the MPI for CARES and the emergency room use projects.

Wisconsin Immunization Registry (WIR)

Dan Hopfensperger, Program Manager for the WIR, and Tom Maerz, WIR Systems Manager, provided information about the registry. Mr. Hopfensperger reported that the WIR was developed in conjunction with the Division of Health Care Financing through the MMIS contract in that division. It is a Web-based system that provides local health departments and health care providers one database for entry of immunization records.

Mr. Hopfensperger said all Wisconsin birth records from 1995 to the present are entered into the system. Parents are offered the opportunity to opt out of the registry through letter that is sent to them. He estimates that less than 1% opt out, but will provide more complete data on this for the Workgroup's consideration. Records are inactivated for those that opt out, have died, or are adopted. WIR has the following options: physician and local health department entry and look-up, query access for schools and parents (need significant identifying information to get this access), management of vaccine supplies, and ordering from state supplies. Mr. Maerz said that clients can have an unlimited number of medical records tied to them; one for each organization where they are sent. Ten states and two US territories are using this software. Relevant statistics include:

- 4.3 million clients in the WIR
- 252 opt outs
- 12,000+ immunizations each day

- 1,200 providers at 2,900 sites
- 2,750 schools accessing the system
- 1,000 active users at any time during normal business hours

Currently only immunization records are built into this system, although other programs have asked about adding a module to this system. In many cases, this potential new information is part of a patient record and would require additional logon security.

Mr. Zettel asked what attracted other states to this software. Mr. Maerz responded that the following factors appear to have drawn states to this software: the de-duplication (resolving an individual uniquely) algorithm; the immunization scheduling component (notes the appropriate times to receive immunizations through a person's life span); the inventory module, which providers can use to track their inventory and order inventory from the state (\$13 million in vaccine distributed through this system); and the array of reports that can be run (real-time and batch reports).

Louis Wenzlow asked about the process for batch processing this software for organizations that are not using one of the larger health software companies. Mr. Maerz said that state staff do not work with the systems but provide access to the interface, which is based on Health Level 7 (HL7) standards. Mr. Hopfensperger said that although there may be development costs to accessing the system, there are no charges for using the system. Mr. Hopfensperger will send a general PowerPoint presentation to the Workgroup for their consideration following this meeting.

Next Meeting

June 22, 2006, 11:00 a.m. - 12:00 p.m.